

**SEEC FORM 21**

Short Form Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 1/07



Electronic Filing

Office Use Only

1. NAME OF COMMITTEE

**A Brookfield Party**

2. TREASURER NAME

Title	First	MI	Last	Suffix
	<b>Robert</b>	<b>A</b>	<b>Iacobello</b>	

3. TREASURER ADDRESS

Street Address	City	State	Zip Code
<b>30 Ironworks Hill Rd</b>	<b>Brookfield</b>	<b>CT</b>	<b>06804</b>

4. ELECTION DATE

5. OFFICE SOUGHT (if applicable)

6. DISTRICT CODE (if applicable)

7. CANDIDATE NAME

Title	First	MI	Last	Suffix

8. TYPE OF REPORT

**October 10 Filing - Original**

9. PERIOD COVERED

Beginning Date

Ending Date

**08/17/2015**

thru

**09/30/2015**

10. CERTIFICATION



I hereby certify and state, under penalties of false statement, that the committee named above, did not receive contributions or other funds, or make or incur expenditures in excess of \$1000 for the period covered by this Short Form Campaign Finance Disclosure Statement.

**Electronic Filing**

SIGNATURE

**Robert Iacobello**

PRINT NAME OF THE SIGNER

**10/02/2015 12:39:14PM**

DATE CERTIFIED

PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.